

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mark A. Maciver Confirmation No.: 9566

Serial No.: 09/838,074 Group Art Unit: 2133

Filed: 04/19/01

Examiner:

RECEIVED

Title: ERROR CORRECTION FOR SYSTEM INTERCONNECTS

AUG 24 2001

Technology Center 2100

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I hereby certify that this correspondence is being transmitted by facsimile to Assistant Commissioner for Patents, Application Processing Division's Customer Correction Branch, Facsimile No. (703) 308-7751, on June 29, 2001.

Blanche E. Schiller  
Blanche E. Schiller  
Attorney for Applicants  
Registration No. 35,670

Date of Signature: June 29, 2001

To: Assistant Commissioner for Patents  
Application Processing Division  
Customer Correction Branch  
Washington, D.C. 20231

COMMUNICATION REQUESTING CORRECTION  
OF OFFICIAL FILING RECEIPT

Sir:

Upon our review of the Official Filing Receipt for the above-identified application, we noted the following error:

INCORRECT INVENTOR INFORMATION

Mark A. Maciver  
Renfrewshire, UNITED KINGDOM

CORRECT INVENTOR INFORMATION

Mark A. Maciver  
Renfrewshire, SCOTLAND

A copy of the Filing Receipt is enclosed herein with the noted correction. Applicants hereby request that a corrected Official Filing Receipt indicating the above-referenced correction be issued.

Respectfully submitted,

Blanche E. Schiller  
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Dated: June 29, 2001

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/838,074	04/19/2001	2133	710	GB900051US1	4	12	2

CONFIRMATION NO. 9566

## FILING RECEIPT



\*OC00000006171818\*

Blanche E. Schiller, Esq.  
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Albany, NY 12203

Date Mailed: 06/12/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Scotland  
Mark A. Maciver, Renfrewshire, [UNITED KINGDOM]

## Assignment For Published Patent Application

International Business Machines Corporation, Armonk, NY;

## Domestic Priority data as claimed by applicant

## Foreign Applications

UNITED KINGDOM 0009804.6 04/25/2000

If Required, Foreign Filing License Granted 06/11/2001

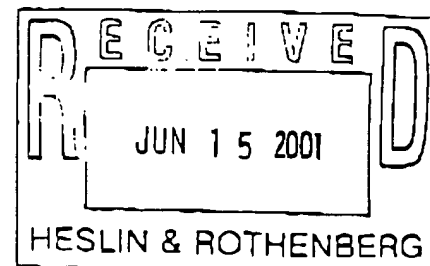
Projected Publication Date: 10/25/2001

Non-Publication Request: No

Early Publication Request: No

## Title

Error correction for system interconnects





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Bib Data Sheet

CONFIRMATION NO. 9566

<b>SERIAL NUMBER</b> 09/838,074	<b>FILING DATE</b> 04/19/2001 <b>RULE</b>	<b>CLASS</b> 714	<b>GROUP ART UNIT</b> 2133	<b>ATTORNEY DOCKET NO.</b> GB900051US1	
<b>APPLICANTS</b> Mark A. Maciver, Renfrewshire, SWEDEN; <b>** CONTINUING DATA *****</b> <i>N/A</i> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0009804.6 04/25/2000 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/11/2001</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Blanche E. Schiller, Esq. HESLIN & ROTHENBERG, P.C. 5 Columbia Circle Albany, NY 12203					
<b>TITLE</b> Error correction for system interconnects					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		